CORRESPONDENCE

October 17, 1951.

To the Editor of the

British Journal of Venereal Diseases,

Sir,—I enjoyed Dr. Clarke's original observations on gonorrhoea among West African Negroes (*Brit. J. vener. Dis.*, 1951, 27, 130-31).

I too, when in West Africa, was struck by the high incidence of "waist pain" in patients suffering from venereal diseases—a condition attributed by some to yaws. In Rhodesia it did not appear to be so common. Personally I have tended to regard it as the African "headache", being usually functional and occasionally organic in origin. Perhaps Dr. Clarke's explanation that it is due to excessive sexual stimulation is indeed correct. It is also frequently encountered in West African patients in London and no one can say that the British climate has any adverse effect on the West African's sexual prowess.

I was interested also in his remarks on the use

of native medicines. During the course of my survey in Southern Rhodesia I paid some attention to this point, collecting such plants and roots as I could induce the natives to admit were used for venereal complaints. These I took either to the Agricultural Experimental Station at Salisbury or to the Bulawayo Museum for identification. The roots proved unidentifiable, but the leaves included Sonchus or "Sow Thistle", Isoberlinia globiflora, and one of the Asparagus species. Infusions from all were said to be used for gonorrhoea. In West Africa I encountered the use of the latex of certain plants, such as, for example, Euphorbia, not to cure venereal disease but to produce self-inflicted sores.

I am,

etc.,

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